



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

May 27, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Woody's Pub & Grill, 101 North 14th Street requesting that Benjamin Moran be approved as the manager of the class c liquor license.

Background information on the applicant is as follows:

Benjamin Moran was born in Lincoln, Nebraska. He attended Grand Island High School graduating in 1994.

Mr. Moran served in the United States Armed Forces 1995 – 1998. He has been employed at Woody's Pub and Grill Since 1998.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



STATE OF NEBRASKA

Set date: 6/7/04
PH: 6-21-04



Mike Johanns
Governor

NEBRASKA LIQUOR CONTROL COMMISSION

Robert B. Rupe
Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

A4-055005
78

May 20, 2004

City Clerk of Lincoln
City/County Building
555 S 10 Street
Lincoln, NE 68508

RE: Manager Application Submittal

Dear Sir/Madam:

The corporation O'Fourteen, Inc DBA Woody's Pub & Grill has submitted the enclosed Application for Corporate Manager. Woody's Pub & Grill has the following liquor license(s) Class C #45853 and is located at 101 N 14 Street, Suite 6, Lincoln, NE 68508 (Lancaster County). The applicant's name is Benjamin R Moran.

Please present this application to your City/County Council and return the results of the action taken to our office. If you have any questions or comments, please give me a call at (402) 471-4881.

Sincerely,

Jackie B. Matulka
Licensing Division

Enclosure

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FILED
CITY CLERKS OFFICE
2004 MAY 21 A 10:56
CITY OF LINCOLN
NEBRASKA

RECEIVE

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://www.nol.org/home/NLCC/>

MAY 19 2004

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION

CLASS & LICENSE NUMBER

O'FOURTEEN INC.

NEBRASKA LIQUOR CONTROL COMMISSION

C + 45853

TRADE NAME OF LICENSED PREMISE

WOODS PUB + GRIFF

STREET ADDRESS OF LICENSED PREMISE

CITY

COUNTY

ZIP CODE

101 N 14th ST. SUITE 6

LINCOLN

LANCASTER

68508

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:

John Mahoney

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN)

SEX
F ☒ M

SOCIAL SECURITY NUMBER

DATE OF BIRTH

PLACE OF BIRTH

MORAN, BENJAMIN, ROBERT

~~XXXXXXXXXX~~

~~XXXXXX~~

LINCOLN

HOME STREET ADDRESS

CITY

COUNTY

STATE

ZIP CODE

730 511th ST. APT. A2

LINCOLN

LANCASTER

NE

68508

HOME TELEPHONE NUMBER

BUSINESS TELEPHONE NUMBER

DRIVERS LICENSE NUMBER & STATE

(402) 525-5304

(402) 438-8383

~~XXXXXXXXXX~~

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)

SOCIAL SECURITY NUMBER

DRIVERS LICENSE NUMBER & STATE

NOT MARRIED

DATE OF BIRTH:

PLACE OF BIRTH

1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law, or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ Yes ☒ No

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

☐ YES ☒ NO

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☒ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?
Nebraska Liquor Control Act (§53-131.01)

☒ YES ☐ NO

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☒ YES ☐ NO

RESIDENCES FOR THE PAST 10 YEARS. APPLICANT AND SPOUSE MUST COMPLETE					
APPLICANT: CITY & STATE		YEAR FROM TO		SPOUSE: CITY & STATE	
		FROM	TO		
UNITED STATES ARMY, ALL OVER.		95	98		
GRAND ISLAND, NE		98	98		
LINCOLN, NE		98	04		

EMPLOYERS - LIST LAST TWO EMPLOYERS				
YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
5-95	5-98	UNITED STATES ARMY	-	-
8-98	PRESENT	WOOD'S PUB & GRILL	MYSELF	(402) 525-5304


PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE

STATE OF NEBRASKA)
) SS
COUNTY OF)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.


Signature of Applicant

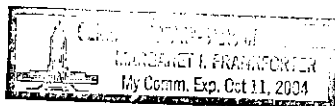
Subscribed in my presence and sworn to before me this 19th
day of May 2004.

Margaret J. Frankforter
Notary Signature & Seal

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this _____
day of _____

Notary Signature & Seal



Liquor License Investigation

Business (DBA) Woody's

☒ Manager ☐ Owner ☐ Other

Name: BENJAMIN MORAN

US Citizen ? ☒ Yes ☐ No

Has applicant ever been cited for liquor law violations ? ☒ No ☐ Yes
Explain _____

Does applicant have an interest in another liquor license ? ☒ No ☐ Yes
Explain _____

Is spouse qualified to hold a license ? Yes ☐ No ☒ N/A

How is applicant if not an owner to be paid ? ☒ Salary ☐ Hourly

How many hours will applicant be at the establishment ? 50+

Any other employment ? ☒ No ☐ Yes, explain _____

Any previous experience with a liquor license ? ☒ Yes ☐ No

Any criminal convictions ? ☒ No ☐ Yes
Comments _____

Is applicant a property owner in Lincoln ? ☐ Yes ☒ No

Is applicant involved in any civil litigation ? ☒ No ☐ Yes
Comments _____

☒ Photo ☒ Records Check ☒ References

Comments _____

Interview Date 5/27/04

RHC class 6-10-04